

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46100

Entity Name: NATIONAL PEDIATRIC CANCER FOUNDATION, INC.**Current Principal Place of Business:**5550 WEST EXECUTIVE DR
SUITE 300
TAMPA, FL 33609**Current Mailing Address:**5550 WEST EXECUTIVE DR
SUITE 300
TAMPA, FL 33609 US**FEI Number:** 59-3097333**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**F & L CORP.
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	WHITE, ROBERT E
Address	5550 WEST EXECUTIVE DR SUITE 300
City-State-Zip:	TAMPA FL 33609
Title	VC
Name	SILVA, AL
Address	5550 WEST EXECUTIVE DR, SUITE 300
City-State-Zip:	TAMPA FL 33609
Title	CHAIRMAN
Name	MAXWELL, JEFF
Address	5550 WEST EXECUTIVE DR SUITE 300
City-State-Zip:	TAMPA FL 33609
Title	DIRECTOR
Name	HELMS, MELISSA
Address	5550 WEST EXECUTIVE DR. SUITE 300
City-State-Zip:	TAMPA FL 33609

Title	DIRECTOR
Name	CAPITANO, FRANK C
Address	5550 WEST EXECUTIVE DR SUITE 300
City-State-Zip:	TAMPA FL 33609
Title	DIRECTOR
Name	HARROD, CHAD
Address	5550 WEST EXECUTIVE DR, SUITE 300
City-State-Zip:	TAMPA FL 33609
Title	CEO
Name	FRAZER, DAVID
Address	5550 WEST EXECUTIVE DR SUITE 300
City-State-Zip:	TAMPA FL 33609
Title	DIRECTOR
Name	LANGFORD, JAY III
Address	5550 WEST EXECUTIVE DR. SUITE 300
City-State-Zip:	TAMPA FL 33609

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID FRAZER

CEO

02/13/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PERSINGER, JEREMY
Address 5550 WEST EXECUTIVE DR
SUITE 300
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name CARRERE, CHRISTOPHER
Address 5550 WEST EXECUTIVE DR
SUITE 300
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name DOYLE, DAN JR.
Address 5550 WEST EXECUTIVE DR
SUITE 300
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name NORTH, ANGELA
Address 5550 WEST EXECUTIVE DR
SUITE 300
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name WEIGNER, MICHAEL
Address 5550 WEST EXECUTIVE DR
SUITE 300
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name LAMPHIER, JOE
Address 5550 WEST EXECUTIVE DR
SUITE 300
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name MEZRAH, MICHAEL
Address 5550 WEST EXECUTIVE DR
SUITE 300
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name BASSIL, JAMES
Address 5550 WEST EXECUTIVE DR
SUITE 300
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name COMPANIONI-SMITH, LISA
Address 5550 WEST EXECUTIVE DR
SUITE 300
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name LEVIN, MICHAEL
Address 5550 WEST EXECUTIVE DR
SUITE 300
City-State-Zip: TAMPA FL 33609

Title SECRETARY
Name SULLIVAN, ALEX
Address 5550 WEST EXECUTIVE DR
SUITE 300
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name ABBOTT, BB
Address 5550 WEST EXECUTIVE DR
SUITE 300
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name WEBSTER, ROB
Address 5550 WEST EXECUTIVE DR
SUITE 300
City-State-Zip: TAMPA FL 33609